2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K98743

GEFEN, SIDNEY

6299-8 POWERS AVE

JACKSONVILLE, FL 32217

Name:

Address:

City-St-Zip:

FILED Feb 25, 2004 Secretary of State

Entity Name: FORTY-TWO REALTY, INC.							
Current Principal Place of Business:					New Principal Place of Business:		
6299-8 POWERS AVE JACKSONVILLE, FL 32217					6260-D DUPONT STATION COURT JACKSONVILLE, FL 32217		
Current Mailing Address:					New Mailing Address:		
P.O. BOX 5 JACKSON\	551260 VILLE, FL 32	2255	US				
FEI Number:	59-2956428	FEI	Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:		
ANSBACHER, LEWIS 5150 BELFORT ROAD JACKSONVILLE, FL 32256 US					ANSBACHER & SCHNEIDER, P.A. 5150 BELFORT ROAD JACKSONVILLE, FL 32256 US		
The above in the State		y submi	its this statement for the p	urpose o	f changing it	s registered	d office or registered agent, or both,
SIGNATURE: MICHAEL N. SCHNEIDER, VICE PRESIDENT					02/25/2004		
	Electro	onic Sig	nature of Registered Age	nt			Date
Election Cam	ıpaign Financi	ing Trus	t Fund Contribution ().				
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DVS (HELMING, HA 2988 BERNIC JACKSONVIL	E DRIVE	••		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	DP (GEFEN, LOIS 6740 N. EPPI JACKSONVIL	NG FOR			Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	DT (JAFFE, BARE 6750 N. EPPI JACKSONVIL	NG FOR	FEN,		Title: Name: Address: City-St-Zip:		() Change () Addition
Title:	AS () Delete	e		Title:	AS	(X) Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

GEFEN, SIDNEY

6260-D DUPONT STATION COURT

JACKSONVILLE, FL 32217

SIGNATURE: LOIS I. GEFEN P 02/25/2004